Case 19-21765-jra Doc 1-3 Filed 06/27/19 Page 1 of 35

Fil	l in this informa	ation to identify your	case:	The Market of the State of the				
De	btor 1	Froylan Vega	Middle Name	16	ast Name			
	btor 2							
	ouse if, filing)	First Name	Middle Name		ast Name			
Un	ited States Bank	cruptcy Court for the:	NORTHERN DISTRI	CT OF INDIA	NA			
1	se number						_	ck if this is an nded filing
		<u>m 106Sum</u>	and Liebilities	and Caut	ain Ctatiatia	al lada waa ati		40/48
Be a	as complete an	d accurate as possib	and Liabilities le. If two married peo	ple are filing	together, both are	equally responsi	ble for supplyi	12/15 ng correct
info	rmation. Fill οι	it all of your schedule	es first; then complete new <i>Summary</i> and ch	the informat	tion on this form. I	lf you are filing an	nended sched	ules after you file
Pa	t 1. Summar	ize Your Assets						
								assets of what you own
1.	Schedule A/E 1a. Copy line	B: Property (Official Fo 55, Total real estate, fi	orm 106A/B) rom Schedule A/B				\$	62,000.00
	1b. Copy line	62, Total personal pro	perty, from Schedule A	/B			\$	5,550.00
	1c. Copy line	63, Total of all property	on Schedule A/B				\$	67,550.00
Pai	rt 2: Summar	ize Your Liabilities						
								iabilities nt you owe
2.	Schedule D: C 2a. Copy the t	<i>Creditors Who Have Cl</i> otal you listed in Colur	aims Secured by Prope nn A, Amount of claim,	erty (Official Fo at the bottom	orm 106D) of the last page of I	Part 1 of Schedule	D \$	62,543.00
3.			<i>Unsecured Claims</i> (Offi 1 (priority unsecured cla			F	\$	798.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecure	d claims) from	line 6j of <i>Schedule</i>	E/F	\$	18,001.00
						Your total liabil	ities \$	81,342.00
Par	t3: Summar	ize Your Income and	Expenses				<u> </u>	
4.		our Income (Official Fo	rm 106l) e from line 12 of <i>Sched</i>	ule I			\$	2,670.00
5.		o <i>ur Expenses</i> (Official nthly expenses from li	Form 106J) ne 22c of <i>Schedule J</i>				\$	1,404.00
Par	t4: Answer	These Questions for	Administrative and St	tatistical Rec	ords			
6.	, .	• •	er Chapters 7, 11, or 1 on this part of the form.		ox and submit this f	orm to the court wit	th your other so	hedules.
7.	Yes What kind of	debt do you have?						
			sumer debts. Consume § 101(8). Fill out lines 8				y for a personal	l, family, or
	☐ Your dek	ots are not primarily o	consumer debts. You l ules.	have nothing t	to report on this par	t of the form. <i>Checi</i>	k this box and s	submit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Deb	Froylan vega	Case Humber (II known)	
8.	From the Statement of Your Current M 122A-1 Line 11; OR, Form 122B Line 11;	Conthly Income: Copy your total current monthly income from Official Form OR, Form 122C-1 Line 14.	\$ 2,720.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

ا بنی با مرتبر در در در مهما تشهور در در شر طیل خورزی ایرون شد برزی و رودی در در در در سومستمین د	Total	claim
From Part 4 on Schedule E/F, copy the following:	pists.	
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	798.00
9c. Claims for death or personal Injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	798.00

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or he a					The state of the s	* *** *** *** ****			
Fill	in this informat	ion to identif	y your case and t	nis filin	g:				
Deb	tor 1	Froylan Ve							
Deh	tor 2	First Name	Middl	e Name	Last Name				
		First Name	Middl	e Name	Last Name				
Unit	ed States Bankr	uptcy Court fo	r the: NORTHER	RN DIST	RICT OF INDIANA				
Case	e number							Пch	neck if this is an
								_ ~	nended filing
Off	icial Forn	n 106A/E	3						
Sc	hedule	A/B: P	ropertv					12/	/15
	er every question	1.	·		his form. On the top of any additional page I Estate You Own or Have an Interest in	s, write your i	name and cas	e number	· (if known).
3.4	Yes. Where is the	e property?			,				
1.1				What	t is the property? Check all that apply				
_	6743 Marylar			15.	Single-family home				emptions, Put
	Street address, if av	ailable, or other des	ecription	Duplex or multi-unit building the amount			unt of any secured claims on Schedule D: s Who Have Claims Secured by Property.		
	Hammond	IN	46323-0000		Manufactured or mobile home Land	Current va			t value of the you own?
-	City	State	ZIP Code		Investment property	\$4	10,000.00		\$40,000.00
					Other	(such as fe			ership interest he entireties, or
				wno	has an interest in the property? Check one Debtor 1 only	Fee sim	•		
	Lake				•	·	-		
-	County				Debtor 1 and Debtor 2 only	- Check	t if this is con	munity n	roperty
						(see ins	structions)	uniy p	1,0,1,
					r information you wish to add about this ite erty identification number:	m, such as lo	cal		

Official Form 106A/B Schedule A/B: Property

page 1

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ebtor 1 Fr	roylan Vega		Cas	e number (if known)	
If you ov	wn or have mor	e than one, list h	nere: What is the property? Check all that apply		
5425 Mo	olesberger Place ess, if available, or other o		Single-family home Duplex or multi-unit building Condominium or cooperative	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on <i>Schedule D</i>
Hammor	ond IN State	46320-0000 ZIP Code	☐ Manufactured or mobile home ☐ Land ☐ Investment property ☐ Timeshare ☐ Other ☐ Who has an interest in the property? Check one ☐ Debtor 1 only	Current value of the entire property? \$10,000.00 Describe the nature of y (such as fee simple, ten a life estate), if known. Fee simple	
Lake County			☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another Other Information you wish to add about this ite property identification number:	Check if this is com	nmunity property
1261 Sur		e than one, list h	nere: What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative	Do not deduct secured cla the amount of any secured Creditors Who Have Clain	d claims on <i>Schedule D</i> .
1261 Sur	mmer St. ss, if available, or other d		What is the property? Check all that apply Single-family home Duplex or multi-unit building	the amount of any secure	d claims on Ś <i>chedule D:</i>
1261 Sur Street address	mmer St. ss, if available, or other d	escription 46320-0000	What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	the amount of any secured Creditors Who Have Claim Current value of the entire property?	d claims on Schedule Dans Secured by Property. Current value of the portion you own? \$12,000. our ownership interes

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

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Debt	or 1 Froylan Vega		Case number (if known)	
3. C a	rs, vans, trucks, tractors, sport utility ve	ehicles, motorcycles		
	No			
	Yes			
3.1	Make: Chevy	Who has an interest in the property? Check one	Do not deduct secured cla	
	Model: Tahoe	Debtor 1 only	the amount of any secure Creditors Who Have Clair	
	Year: 1997	Debtor 2 only	Current value of the	Current value of the
	Approximate mileage: 200,000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other information:	\square At least one of the debtors and another		
		Check if this is community property (see instructions)	\$750.00	\$750.00
			De met de dont en come de la	
3.2	Make: Honda	Who has an interest in the property? Check one	Do not deduct secured cla the amount of any secure	
	Model: Accord	Debtor 1 only	Creditors Who Have Clair	ms Secured by Property.
	Year: 2000	Debtor 2 only	Current value of the	Current value of the
	Approximate mileage: 220,000 Other information:	☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another	entire property?	portion you own?
	Cutof information.	At least one of the deptors and another		
		☐ Check if this is community property (see instructions)	\$550.00	\$550.00
3.3	Make: Toyota	Who has an interest in the property? Check one	Do not deduct secured cla	
	Model: Camry	Debtor 1 only	the amount of any secure Creditors Who Have Clain	d claims on <i>Schedule ப:</i> ns Secured by Property.
	Year: 2001	☐ Debtor 2 only	Current value of the	Current value of the
	Approximate mileage: 200,000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other information:	\square At least one of the debtors and another		
	driven by son in college	☐ Check if this is community property (see instructions)	\$500.00	\$500.00
1. W a Exa ■ N	<i>mples:</i> Boats, trailers, motors, personal wa No	d other recreational vehicles, other vehicles, a tercraft, fishing vessels, snowmobiles, motorcycle	and accessories accessories	
		n for all of your entries from Part 2, including that number here		\$1,800.00
_ %	-			
Part 3	Describe Your Personal and Household Ite ou own or have any legal or equitable int			Current value of the
·	usehold goods and furnishings	letest in any of the following items r	p D	corrent value of the cortion you own? On not deduct secured laims or exemptions.
Ex.	amples: Major appliances, furniture, linens	china, kitchenware		
	Household furn	iture & appliances		\$1,000.00
Exa	including cell phones, cameras, m	eo, stereo, and digital equipment; computers, print edia players, games	ters, scanners; music collectio	ns; electronic devices
□ i				
Micial	Form 106Δ/B	Schodula A/R: Property		2000

Official Form 106A/B

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Debtor 1	Froylan Ve	ga Case number (i	if known)
Yes	. Describe		
		Misc. electronics including TV & computer equipment	\$200.00
<i>Examp</i> ■ No	ibles of value bles: Antiques ar other collect	nd figurines; paintings, prints, or other artwork; books, pictures, or other art objects; star ctions, memorabilia, collectibles	np, coin, or baseball card collections;
<i>Examp</i> ■ No	nent for sports vles: Sports, pho musical ins	tographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis;	canoes and kayaks; carpentry tools;
■ No		es, shotguns, ammunition, and related equipment	
□ No		clothes, furs, leather coats, designer wear, shoes, accessories	
		Wearing apparel	\$150.00
■ No □ Yes. 13. Non-f a Examp		ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches,	gems, gold, silver
14. Any ot ■ No		nd household items you did not already list, including any health aids you did no	ot list
		e of all of your entries from Part 3, including any entries for pages you have attack t number here	hed \$1,350.00
A. A. S	scribe Your Fina vn or have any	ncial Assets legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No		have in your wallet, in your home, in a safe deposit box, and on hand when you file you	ur petition
		savings, or other financial accounts; certificates of deposit; shares in credit unions, brok . If you have multiple accounts with the same institution, list each.	kerage houses, and other similar
		Institution name:	
Official Forn	n 106A/B	Schedule A/B: Property	page 4

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D	ebtor 1	Froylan Ve	ga			Case number (if known)	
			17.1.	Checking	Chase Bank		\$350.00
			17.2.	Checking	Chase Bank		\$50.00
18	. Bonds , <i>Examp</i>	, mutual funds ples: Bond funds	, or public s, investme	cly traded stocks ent accounts with brol	kerage firms, money market ac	ccounts	
	■ No						
	☐ Yes			Institution or issuer n	iame:		
19	joint v		tock and	interests in incorpo	rated and unincorporated bu	usinesses, including an interest in a	an LLC, partnership, and
	No						
	☐ Yes.	Give specific in		about them ne of entity:		% of ownership:	
20	Negotia	able instrument	s include p	ersonal checks, cash	tiable and non-negotiable ins niers' checks, promissory notes nsfer to someone by signing or	s, and money orders.	
		Give specific int	formation s	shout them			
	Li res.	Give specific fill		uer name:			
21.		n ent or pensio les: Interests in)3(b), thrift savings accounts, c	or other pension or profit-sharing plans	S
	■ No						
	∐ Yes. I	List each accou		ely. of account:	Institution name:		
22.	Your st Examp		ed deposit	s you have made so	that you may continue service public utilities (electric, gas, wat	or use from a company ter), telecommunications companies,	or others
	■ No □ Yes				Institution name or indivi	idual:	
23.		es (A contract f	or a period	dic payment of money	y to you, either for life or for a n	number of years)	
	No ☐ Yes	ls	ssuer nam	e and description.			
24.	26 U.S.C	s in an educati C. §§ 530(b)(1),			alified ABLE program, or un	der a qualified state tuition progran	n.
	■ No □ Yes	lr	nstitution n	ame and description.	. Separately file the records of	any interests.11 U.S.C. § 521(c):	
25.	Trusts,	equitable or fu	ıture inter	ests in property (otl	her than anything listed in lir	ne 1), and rights or powers exercisa	able for your benefit
	☐ Yes.	Give specific in	formation	about them			
					d other intellectual property Is from royalties and licensing a	agreements	
	☐ Yes.	Give specific in	formation	about them			
27.	Examp			r general intangibles usive licenses, coope		quor licenses, professional licenses	
	☑ No □ Yes.	Give specific in	formation	about them			
Me	oney or p	property owed	to you?				Current value of the

portion you own?
Do not deduct secured claims or exemptions.

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D	ebtor 1	Froylan Vega	Case number (if known)	
28	■ No	funds owed to you Give specific information about them, including whether you al	lready filed the returns and the tax years	
29	Exam _t ■ No	support oles: Past due or lump sum alimony, spousal support, child sup Give specific information	oport, maintenance, divorce settlement, property se	ttlement
30.		amounts someone owes you bles: Unpaid wages, disability insurance payments, disability be benefits; unpaid loans you made to someone else	enefits, sick pay, vacation pay, workers' compensa	ition, Social Security
31.	Interes Examp ■ No	Give specific information ts in insurance policies bles: Health, disability, or life insurance; health savings account	t (HSA); credit, homeowner's, or renter's insurance	
	☐ Yes.	Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
	If you a someo	terest in property that is due you from someone who has deare the beneficiary of a living trust, expect proceeds from a life one has died. Give specific information	lied insurance policy, or are currently entitled to receive	e property because
	Examp No	against third parties, whether or not you have filed a laws les: Accidents, employment disputes, insurance claims, or right	uit or made a demand for payment its to sue	
	No No	contingent and unliquidated claims of every nature, includi	ng counterclaims of the debtor and rights to se	t off claims
35.	Any fin	ancial assets you did not already list Give specific information		
36		he dollar value of all of your entries from Part 4, including art 4. Write that number here		\$400.00
Pa	t 5: Des	scribe Any Business-Related Property You Own or Have an Interes	t In. List any real estate in Part 1.	
	□ No. Go	wn or have any legal or equitable interest in any business-related to Part 6. o to line 38.	property?	
				Current value of the portion you own? Do not deduct secured claims or exemptions.
	Accou n ■ No	its receivable or commissions you already earned		
		Describe		

Official Form 106A/B

Schedule A/B: Property

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Debtor	1 Froylan Vega	Case number (if known)	
39. Off i <i>Ex</i> : ■ N	ice equipment, furnishings, and supplies camples: Business-related computers, software, modems, prin	iters, copiers, fax machines, rugs, telephones, desks, chairs, e	electronic devices
	es. Describe		
40. M ad	chinery, fixtures, equipment, supplies you use in busines lo	s, and tools of your trade	
Y	'es. Describe		
	Mechanic's tools and equipment		\$2,000.00
41. Inv e	-		
■ N	lo 'es. Describe		
42. Inte	erests in partnerships or joint ventures		
■ N			
□ Y	es. Give specific information about them Name of entity:	% of ownership:	
43. Cus	stomer lists, mailing lists, or other compilations		
□ро	your lists include personally identifiable information (as defined	in 11 U.S.C. § 101(41A))?	
	■ No □ Yes. Describe		
■ N	y business-related property you did not already list lo es. Give specific information		
	dd the dollar value of all of your entries from Part 5, includ r Part 5. Write that number here		\$2,000.00
Part 6:	Describe Any Farm- and Commercial Fishing-Related Property Y If you own or have an interest in farmland, list it in Part 1.	ou Own or Have an Interest In.	
	you own or have any legal or equitable interest in any fari No. Go to Part 7.	m- or commercial fishing-related property?	
	Yes. Go to line 47.		
Part 7:	Describe All Property You Own or Have an Interest in That	You Did Not List Above	
Exe	you have other property of any kind you did not already li amples: Season tickets, country club membership	st?	
■ No	o es. Give specific information		
54. A d	dd the dollar value of all of your entries from Part 7. Write	that number here	\$0.00

Official Form 106A/B

Schedule A/B: Property

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Debt	or 1 Froylan Vega			Case number (if known)	
Part 8	List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$62,000.00
56.	Part 2: Total vehicles, line 5		\$1,800.00		
57.	Part 3: Total personal and household items, line 15		\$1,350.00		
58.	Part 4: Total financial assets, line 36		\$400.00		
59.	Part 5: Total business-related property, line 45	-	\$2,000.00		
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61		\$5,550.00	Copy personal property total	\$5,550.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62				\$67,550.00

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Fill in this infor	mation to identify your	case:		
Debtor 1	Froylan Vega			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF INDIANA	
Case number				Charle if this is an
(if known)				☐ Check if this is an amended filing

Official Form 106C

Part 1 Identify the Property You Claim as Exempt

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming	? Check one only, eve	n if yo	our spouse is filing with you.	
	Mare claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	☐ You are claiming federal exemptions. 11 to	J.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	mpt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	6743 Maryland Avenue Hammond, IN 46323 Lake County	\$40,000.00		\$19,300.00	Ind. Code § 34-55-10-2(c)(1)
	Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
	5425 Molesberger Place Hammond, IN 46320 Lake County	\$10,000.00	*	\$4,000.00	Ind. Code § 34-55-10-2(c)(2)
	Line from Schedule A/B: 1.2			100% of fair market value, up to any applicable statutory limit	
	1261 Summer St. Hammond, IN 46320	\$12,000.00	in Car	\$1,600.00	Ind. Code § 34-55-10-2(c)(2)
	Lake County Line from Schedule A/B: 1.3			100% of fair market value, up to any applicable statutory limit	
	1997 Chevy Tahoe 200,000 miles	\$750.00	52.	\$750.00	Ind. Code § 34-55-10-2(c)(2)
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
	2000 Honda Accord 220,000 miles	\$550.00	П	\$550.00	Ind. Code § 34-55-10-2(c)(2)
	Line from Schedule A/B: 3.2			100% of fair market value, up to	

any applicable statutory limit

btor 1 Froylan Vega			Case number (if known)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ock only one box for each exemption.	
Household furniture & appliances Line from Schedule A/B: 6.1	\$1,000.00		\$1,000.00	Ind. Code § 34-55-10-2(c)(2)
			100% of fair market value, up to any applicable statutory limit	
Misc. electronics including TV & computer equipment	\$200.00		\$200.00	Ind. Code § 34-55-10-2(c)(2)
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
Wearing apparel Line from Schedule A/B: 11.1	\$150.00		\$150.00	Ind. Code § 34-55-10-2(c)(2)
Line from Schedule AVD. 11.1			100% of fair market value, up to any applicable statutory limit	
Checking: Chase Bank Line from Schedule A/B: 17.1	\$350.00		\$350.00	Ind. Code § 34-55-10-2(c)(3)
Ellio II oli ogliodalio 742. TYTI			100% of fair market value, up to any applicable statutory limit	
Checking: Chase Bank Line from Schedule A/B: 17.2	\$50.00		\$50.00	Ind. Code § 34-55-10-2(c)(3)
LINE HOM Schedule 2011. 17.2			100% of fair market value, up to any applicable statutory limit	
Mechanic's tools and equipment Line from Schedule A/B: 40.1	\$2,000.00	· 4 51	\$2,000.00	Ind. Code § 34-55-10-2(c)(2)
			100% of fair market value, up to any applicable statutory limit	
Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every No Yes. Did you acquire the property cover No Yes	3 years after that for ca	ses fil	ed on or after the date of adjustmer	,

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Fill in this information to identify you	ur case:		₹ \d \$	
Debtor 1 Froylan Vega				
First Name	Middle Name Last Name		-	
Debtor 2 (Spouse if, filing) First Name	Middle Name Last Name		-	
United States Bankruptcy Court for the	: NORTHERN DISTRICT OF INDIANA		-	
Case number (if known)			_	eck if this is an ended filing
Official Form 106D				
Schedule D: Creditors	Who Have Claims Secure	ed by Propert	У	12/15
	If two married people are filing together, both are out, number the entries, and attach it to this form.			
1. Do any creditors have claims secured by	y your property?			
\square No. Check this box and submit t	his form to the court with your other schedules.	You have nothing else t	to report on this form	۱.
Yes. Fill in all of the information	below.			
Part 1: List All Secured Claims				
	more than one secured claim, list the creditor separates a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.		Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 Dean Hensley	Describe the property that secures the claim:	\$2,795.00	\$40,000.0	
Creditor's Name	6743 Maryland Avenue Hammond, IN 46323 Lake County			
7716 Vista Hills Dr. Las Vegas, NV 89128	As of the date you file, the claim is: Check all that apply. ☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		secured		
Debtor 2 only	_			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ Check if this claim relates to a	■ Judgment lien from a lawsult □ Other (including a right to offset)			
community debt	Utiles (including a right to offset)			
Date debt was incurred 7/18/2008	Last 4 digits of account number 2027			
2.2 Lake County Treasurer	Describe the property that secures the claim:	\$9,263.00	\$10,000.0	\$0.00
Creditor's Name	5425 Molesberger Place Hammond, IN 46320 Lake County			
45-03-31-405-006.000-023	As of the date you file, the claim is: Check all that			
2293 N. Main St. Crown Point, IN 46307	apply.			
Number, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated			
Hambor, Guodi, Gity, Guite & Zip Godo	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or s	ecured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit	T		
☐ Check if this claim relates to a community debt	Other (including a right to offset) Property	ıaxes		·
Date debt was incurred	Last 4 digits of account number 0023	<u> </u>		

Official Form 106D

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2.3 Lake County Treasurer Describe the property that secures the claim: \$15,854.00 \$12,000.00 \$3,854.00 45-07-06-201-020,000-023 2233 N. Main St. Crown Point, IN 46397 Main's Crown Point, IN 46397 Check one. Check of the debt'? Check one. C	Debtor 1 Froylan Vega		Case	number (if known)		
45-07-06-201-020,000-023 2239 N. Main St. Crown Point, IN 48307 Number, Street, Chy, State & Zio Ose Who owes the deb17 Check one. Debtor 1 and Pebbor 2 only Debtor 1 and Debtor 2 onl	First Name Middle N	ame Last Name				
45-07-06-201-020,000-023 2239 N. Main St. Crown Point, IN 48307 Number, Street, Chy, State & Zio Ose Who owes the deb17 Check one. Debtor 1 and Pebbor 2 only Debtor 1 and Debtor 2 onl	2.3 Lake County Treasurer	Describe the property that secures the clair	n:	\$15,854.00	\$12,000.00	\$3,854.00
45-07-06-201-020,000-023 2293 N. Main St. Crown Point, IN 46307 Nemers, Steet, City, Stee a 2p cose Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 7 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 1 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 7 only Debtor 6 only Debtor 8 only Debtor 9		1261 Summer St. Hammond, IN				
As of the date you life, the claim is: Crown point, IN 480.7 Number; Street, Clsy, Blate & Zip Code Disputed		46320 Lake County				
Zeb N. N. Main J. Crown Point, IN 46307 Naminer, Street, City, Sales & Zep Caste Unliquid-sized Disputed from Your Character of the delators and another of the claim to the community delated to a commun		As of the date you file, the claim is: Check all	that			
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Who owes the debt? Check one. Debtor 1 only	Number, Street, City, State & Zip Code					
Debtor 1 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 3 only Debtor 4 and Debtor 2 only Date debt was incurred Last 4 digits of account number Other (including a right to offset) Date debt was incurred Last 4 digits of account number Other (including a right to offset) Describe the property that secures the claim: \$34,831,00 \$40,000.00 \$0.00 \$743 Maryland Avenue Harmond, IN 48323 Lake County As of the date you file, the claim is: Chock all that apply. As of the date you file, the claim is: Chock all that apply. Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 3 and 3 an	Who owes the debt? Check one.					
Debtor 1 and Debtor 2 only			e or secured			
Check if this claim relates to a community debt Check all that apply. Statutory lien (such as tax leen, mechanic's lien) Judgment lien from a lewsuit. Check if this claim relates to a community debt Check all that apply Check all that apply.	•		o or booding			
Act and the delibrors and another Check if this claim relates to a community debit Contect (including a right to offset) Property Taxes		Statutory lien (such as tay lien, mechanic's	lien)			
Ceduck if this claim relates to a community debt Date debt was incurred Lest 4 digits of account number 0023 2.4 Lodge Series III Trust Ceduce Name ATTN: Chief Officer or Agent 7114 E. Stetson Dr., Ste. 250 Scottsdale, AZ 85251 Namber. Stevet, City, State & ZD Code Who owes the debt? Check one. Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Community debt Date debt was incurred Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. Add the dollar value of your entries in Column A on this page. Write that number here: Se2,543.00 Fail State		• •	licit)			
2.4 Lodge Series III Trust Describe the property that secures the claim: \$34,631.00 \$40,000.00 \$0.00 \$0.00 \$1.00 \$	☐ Check if this claim relates to a		erty Taxes			
Creditor's Name ATTN: Chief Officer or Agent 7114 E. Stetson Dr., Ste. 250 Scottsdale, AZ 85251 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Al least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. Write that number here: Se2,543.00 Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. Part 222 List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one oraditor for any of the debts that you elsed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. Name, Number, Street, City, State & Zip Code Chase Home Finance ATTN: Chief Officer or Agent 3415 Vision Drive Columbus, OH 43219 Name, Number, Street, City, State & Zip Code Feiwell & Hannoy, P.C.	Date debt was incurred	Last 4 digits of account number	0023			
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ATTN: Chief Officer or Agent 7114 E. Stetson Dr., Ste. 250 Scottsdale, AZ 85251 Number, Sreat, City, Stale & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 1 and Debtor 2 only An agreement you made (such as mortgage or secured car loan) Attree of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. Add the dollar value of your form, add the dollar value totals from all pages. Eart 22 List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional errosins to be notified for any debts in Part 1, do not fill out or submit this page. Name, Number, Street, City, State & Zip Code Chase Home Finance ATTN: Chief Officer or Agent 3415 Vision Drive Columbus, OH 43219 Name, Number, Street, City, State & Zip Code Columbus, OH 43219				\$34,631.00 <u> </u>	\$40,000.00	\$0.00
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Columbus, OH 43219 Name, Number, Street, City, State & Zip Code Feiwell & Hannoy, P.C. On which line in Part 1 did you enter the creditor? 2.4		nt .	Last 4 digits o	f account number		
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Feiwell & Hannoy, P.C. On which line in Part 1 did you enter the creditor? 2.4						
Feiwell & Hannoy, P.C.	Name Number Street City State 8-7	Zin Code	Om sadellede lite	In Don't 4 allal concentration	araditara 3 A	
			on which line	in Paπ i did you enter the	creditor?	
	8415 Allison Pointe Blvd., S	uite 400	Last 4 digits o	f account number		
Indianapolis, IN 46250	Indianapolis, IN 46250					

Official Form 106D

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Deb	or 1 Froylan Vega	1		Case number (if known)
	First Name	Middle Name	Last Name	
	Name, Number, Street Harris Law Firm 11051 Broadway Crown Point, IN	, Ste. C2		On which line in Part 1 did you enter the creditor? Last 4 digits of account number
	Name, Number, Street Heather Hensley 2441 Blaine St. Gary, IN 46406	, City, State & Zip Code		On which line in Part 1 did you enter the creditor?
	Name, Number, Street Lake County Cle RE 45D05-1002- 2293 N. Main St. Crown Point, IN	MF-00086		On which line in Part 1 did you enter the creditor? 2.4 _ Last 4 digits of account number
	Name, Number, Street SN Servicing Co 323 Fifth Street Eureka, CA 9550			On which line in Part 1 did you enter the creditor?

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			•							
Fill	in this infor	mation to identify your ca	ıse:							
Deb	otor 1	Froylan Vega								
		First Name	Middle Name	Last N	Name	•				
l	otor 2 ouse if, filing)	First Name	Middle Name	1 se l	Name					
Uni	ted States B	ankruptcy Court for the:	NOR THERN DIS	TRICT OF INDIANA						
	se number									
(if kn	iown)							Check if amende	this is an d filing	
Off	icial For	m 106E/F								
		E/F: Creditors Wh	o Have Un	secured Clai	ms				12/15	
Sche left. / name	edule D: Credi Attach the Co e and case nu	utory Contracts and Unexpire tors Who Have Claims Secure ntinuation Page to this page. mber (if known). All of Your PRIORITY Unse	ed by Property. If n If you have no info	ore space is needed	, copy the Part	you need, fill it out,	number the e	entries in	the boxes on t	the ur
1,7-2	W. C. C. C.	ors have priority unsecured of		2						
	No. Go to	, ,	Jamis agamst you	•						
	Yes.	CIT Z.								
2.	List all of you identify what to possible, list the	ir priority unsecured claims. I ype of claim it is. If a claim has i ne claims in alphabetical order a than one creditor holds a parti	ooth priority and non according to the cred	priority amounts, list th litor's name. If you hav	nat claim here an ve more than two	nd show both priority a	nd nonpriority	/ amounts	. As much as	,
	(For an explar	ation of each type of claim, see	the instructions for	this form in the instruc	tion booklet.)	Total claim	Priority amount		Nonpriority amount	
2.1		Department of Reven	ue Last 4 di	igits of account numl	ber	\$400.00		00.00		.00
	Bankru Indiana 100 No Indiana	reditor's Name uptcy Section - MS 108 Government Center N rth Senate Avenue, N2 polis, IN 46204	orth 40	as the debt incurred?		I Mark angle				
		Street City State Zip Code d the debt? Check one.		e date you file, the cla	ılm is: Check alı	i that apply				
	Debtor 1		☐ Conti ☐ Unliq							
	Debtor 2	•	☐ Dispu							
		and Debtor 2 only		กเอน PRIORITY unsecured	claim:					
		ne of the debtors and another		estic support obligation						
		ne or the debtors and another this claim is for a community		s and certain other deb		rovernment				
		unis claim is for a community subject to offset?		is for death or persona	, ,	•				
	■ No			. Specify	yany mino you					
	☐Yes		_ 5000	income	tax					

Debtor 1 Froylan Vega		Case number (if known)			
2.2 Internal Revenue Service Priority Creditor's Name P.O. Box 7346	Last 4 digits of account number	\$398.00	398.00 \$0.00		
Philadelphia, PA 19101-7346					
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is:	Check all that apply			
	☐ Contingent				
Debtor 1 only	☐ Unliquidated				
☐ Debtor 2 only	☐ Disputed				
Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:				
\square At least one of the debtors and another	☐ Domestic support obligations				
☐ Check if this claim is for a community debt	Taxes and certain other debts you	owe the government			
Is the claim subject to offset?	\square Claims for death or personal injury	while you were intoxicated			
■ No	Other. Specify				
☐ Yes	income tax				
 Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each clathan one creditor holds a particular claim, list the other opens. 	aim. For each claim listed, identify what t	ype of claim it is. Do not list claims already	included in Part 1. If more		
4.1 Bank Of America	Last 4 digits of account number	7640	Notice/Unknown		
Nonpriority Creditor's Name Attention: Recovery Department 4161 Peidmont Pkwy. Greensboro, NC 27410	When was the debt incurred?	Opened 7/09/02 Last Active 9/29/09			
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply			
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	ł claim:			
\square Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
Mo No	\square Debts to pension or profit-sharin	g plans, and other similar debts			
☐ Yes	■ Other. Specify CreditCard		_		

Debtor 1 Froylan Vega						
	Cach Llc/Square Two Financial Nonpriority Creditor's Name	Last 4 digits of account number	1729	\$2,221.00		
4	Attention: Bankruptcy 4340 South Monaco St. 2nd Floor	When was the debt incurred?	Opened 5/01/10			
7	Denver, CO 80237 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
J	Debtor 1 only	☐ Contingent				
[Debtor 2 only	☐ Unliquidated				
[\square Debtor 1 and Debtor 2 only	☐ Disputed				
[$oldsymbol{\square}$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
c	☐ Check if this claim is for a community		ration agreement or divorce that you did not			
_	s the claim subject to offset?	report as priority claims				
	No No	Debts to pension or profit-sharin				
L	Yes	Other. Specify Collection	Attorney Fleet Bank Ri N.A.			
	Chase Ionpriority Creditor's Name	Last 4 digits of account number	1761	\$4,164.00		
-	Po Box 15298 Vilmington, DE 19850	When was the debt incurred?	Opened 6/01/08 Last Active 4/16/12			
	lumber Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
1	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only ☐ Unliquidated					
E	Debtor 1 and Debtor 2 only	☐ Disputed				
	$\operatorname{\square}$ At least one of the debtors and another	Type of NONPRIORITY unsecured				
	Check if this claim is for a community	☐ Student loans				
	ebt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing				
[Yes	Other. Specify CreditCard				
	Chase	Last 4 digits of account number	3966	\$4,135.00		
	onpriority Creditor's Name		Opened 8/01/07 Last Active			
V	Po Box 15298 Vilmington, DE 19850	When was the debt incurred?	4/11/12			
	umber Street City State Zip Code /ho incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
_	At least one of the debtors and another	Type of NONPRIORITY unsecured Student loans				
	Check if this claim is for a community	✓ Ustudent loans ☐ Obligations arising out of a separation agreement or divorce that you did not				
	the claim subject to offset?	report as priority claims				
_						
	No	Debts to pension or profit-sharing	plans, and other similar debts			

Debto	¹ Froylan Vega		Case number (if known)				
4.5	Chase Nonpriority Creditor's Name	Last 4 digits of account number	8869	\$433.00			
	Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 11/01/95 Last Active 4/16/12				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
	No	Debts to pension or profit-sharing	g plans, and other similar debts				
	☐ Yes	■ Other. Specify CreditCard					
4.6	Chase - Cc	Last 4 digits of account number	5533	\$0.00			
	Nonpriority Creditor's Name		Opened 1/01/94 Last Active				
	Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	3/31/05				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
	■ No	\square Debts to pension or profit-sharin	g plans, and other similar debts				
	☐ Yes	Other. Specify CreditCard					
4.7	Chase - Cc Nonpriority Creditor's Name	Last 4 digits of account number	2918	\$0.00			
	Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 7/01/00 Last Active 2/09/06				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims					
	No.	lacksquare Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	Other. Specify CreditCard					

Debtor	1 Froylan Vega		Case number (if known)	
4.8	Chase Mht Bk Nonpriority Creditor's Name	Last 4 digits of account number	9268	\$3,605.00
	Attention: Bankruptcy Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 11/01/02 Last Active 4/11/12	
•	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify CreditCard		
4.9	Citibank Sd, Na Nonpriority Creditor's Name	Last 4 digits of account number	4915	\$0.00
	Attn: Centralized Bankruptcy Po Box 20507 Kansas City, MO 64195	When was the debt incurred?	Opened 9/01/94 Last Active 5/15/01	
-	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other Specify CreditCard	· · · · · · · · · · · · · · · · · · ·	
4.1	Citibank Usa	Last 4 digits of account number	5824	\$0.00
U	Nonpriority Creditor's Name			Ψ0.00
	Citicorp Credit Services/Attn: Centraliz Po Box 20363	When was the debt incurred?	Opened 2/01/02 Last Active 4/06/02	
-	Kansas City, MO 64195 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separ		
	■ No	\square Debts to pension or profit-sharing	plans, and other similar debts	
	☐Yes	Other. Specify ChargeAcce	ount	

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Debtor	¹ Froylan Vega		Case number (if known)			
4.1	Consecofin/Greentree	Last 4 digits of account number	7134	Notice/Unknown		
	Nonpriority Creditor's Name Attn: Bankruptcy Department P.O. Box 6154 Rapid City, SD 57709	When was the debt incurred?	Opened 12/01/00 Last Active 2/01/03			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	i claim:			
	☐ Check if this claim is for a community debt	☐ Student loans				
	Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	☐ Yes	Other. Specify ChargeAcc	ount			
4.1	Gecrb/walmart	Last 4 digits of account number	3043	\$0.00		
	Nonpriority Creditor's Name Po Box 981400 El Paso, TX 79998	When was the debt incurred?	Opened 7/01/93 Last Active 9/27/00			
-	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:			
	Check if this claim is for a community	☐ Student loans				
	debt ls the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify ChargeAcc	ount			
	Hsbc Bank Nonpriority Creditor's Name	Last 4 digits of account number	0695	\$211.00		
	Po Box 5253 Carol Stream, IL 60197	When was the debt incurred?	Opened 12/03/08 Last Active 3/10/12			
-	Number Street City State Zip Code Who Incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply			
	Debtor 1 only					
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	·				
	At least one of the debtors and another	claim:				
	☐ Check if this claim is for a community debt					
	Is the claim subject to offset?					
	■ No	Debts to pension or profit-sharing	pians, and other similar debts			
	☐ Yes	Other. Specify CreditCard				

Debt	or 1 Froylan Vega	Case number (if known)				
4.1 4	Hsbc/bstby Nonpriority Creditor's Name	Last 4 digits of account number	2506	\$0.00		
	1405 Foulk Road Wilmington, DE 19808	When was the debt incurred?	Opened 9/10/04 Last Active 12/18/04			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent				
	Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured	l claim:			
	☐ At least one of the debtors and another☐ Check if this claim is for a community debt Is the claim subject to offset? ————————————————————————————————————	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify ChargeAcc				
4.1	Hsbc/Menards		6994	#0.00		
5	Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 5263	Last 4 digits of account number When was the debt incurred?	Opened 12/01/00 Last Active 2/24/12	\$0.00		
	Carol Stream, IL 60197 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i				
	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans				
	debt Is the claim subject to offset? ■ No	☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharing				
	☐ Yes	Other, Specify ChargeAcc				
4.1 6	Kohls/chase Nonpriority Creditor's Name	Last 4 digits of account number	0652	\$0.00		
	Po Box 3115 Milwaukee, WI 53201	When was the debt incurred?	Opened 12/01/03 Last Active 6/26/04			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply			
	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separ report as priority claims	claim: ation agreement or divorce that you did not			
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	Other. Specify ChargeAccount				

Debto	r 1 _Froylan Vega		Case number (if known)						
4.1	Lowes / MBGA / GEMB	Last 4 digits of account number	2256	\$0.00					
_	Nonpriority Creditor's Name Attention: Bankruptcy Department Po Box 103104 Roswell, GA 30076 Number Street City State Zip Code	When was the debt incurred?							
	Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply						
	Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	Debtor 1 and Debtor 2 only	☐ Disputed							
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	f claim:						
	☐ Check if this claim is for a community	☐ Student loans							
	debt is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not						
	No	Debts to pension or profit-sharin	g plans, and other similar debts						
	Yes	Other. Specify ChargeAcc	ount	-					
4.1 8	Optimum Mastercard	Last 4 digits of account number	0695	\$215.00					
	Nonpriority Creditor's Name P.O. Box 80051	When was the debt incurred?	2001-2011						
	Salinas, CA 93912-0069 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply						
	■ Debtor 1 only	☐ Contingent							
	☐ Debtor 2 only	☐ Unliquidated ☐ Disputed							
	☐ Debtor 1 and Debtor 2 only								
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:						
	☐ Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims							
	No No	Debts to pension or profit-sharing	g plans, and other similar debts						
	Yes	Other. Specify Credit Card							
4.1	Portfolio Recovery Assoc			Notice/Unknown					
9	Nonpriority Creditor's Name	Last 4 digits of account number		Notice/Oliknown					
	120 Corporate Blvd. Norfolk, VA 23502	When was the debt incurred?							
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply						
	■ Debtor 1 only	☐ Contingent							
	☐ Debtor 2 only	☐ Unliquidated							
	Debtor 1 and Debtor 2 only	☐ Disputed							
	\square At least one of the debtors and another	_ <u></u>	Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?	report as priority claims	ation agreement or divorce that you did not						
	■ No	Debts to pension or profit-sharing	plans, and other similar debts						
	☐ Yes	Other. Specify NOTICE							

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Debtor	¹ Froylan Vega	Case number (if known)						
4.2	Providian/Chase Nonpriority Creditor's Name	Last 4 digits of account number	0778	\$0.00				
	Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850 Number Street City State Zip Code	When was the debt incurred?						
	Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:					
	☐ At least one of the debtors and another☐ Check if this claim is for a community	Student loans	u ciaim:					
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not					
	■ No	\square Debts to pension or profit-sharing	ng plans, and other similar debts					
	☐ Yes	Other. Specify CreditCard						
4.2	Regional Mental Health Center Nonpriority Creditor's Name	Last 4 digits of account number		\$108.00				
	Geminus Corp. 8400 Louisiana St.	When was the debt incurred?						
-	Merrillville, IN 46410-6353 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply					
	Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	Disputed	·					
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	☐ Check if this claim is for a community debt Is the claim subject to offset?							
	■ No	Debts to pension or profit-sharin	Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	Other. Specify MED						
	Sears/cbna Nonpriority Creditor's Name	Last 4 digits of account number	0761	\$2,474.00				
	Po Box 6282 Sioux Falls, SD 57117	When was the debt incurred?	Opened 6/01/93 Last Active 4/10/12					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply					
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only							
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	l claim:					
	☐ Check if this claim is for a community debt	ration agreement or divorce that you did not						
	Is the claim subject to offset?							
	■ No □ Yes	Debts to pension or profit-sharing	g pians, and other similar debts					
	I ES	Other, Specify CreditCard						

Debtor	¹ Froylan Vega		Case number (if known)						
4.2	Slate from Chase	Last 4 digits of account number	8869	\$435.00					
	Nonpriority Creditor's Name P.O. Box 15298 Wilmington, DE 19850-5298	When was the debt incurred?	2000-2011						
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply						
	Who incurred the debt? Check one.								
	Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	Debtor 1 and Debtor 2 only	☐ Disputed							
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
	Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not						
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts						
	☐ Yes	Other, Specify Credit Card							
		- Other, Specify							
4.2 4	Tnb-Visa (TV) / Target	Last 4 digits of account number	4756	\$0.00					
	Nonpriority Creditor's Name C/O Financial & Retail Services Mailstop BV P.O.Box 9475 Minneapolis, MN 55440	When was the debt incurred?	Opened 12/06/05 Last Active 10/01/06						
,	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply						
	Who incurred the debt? Check one.								
	Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	Debtor 1 and Debtor 2 only	☐ Disputed	•						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:							
	Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?	 ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts 							
	No No								
	Yes	■ Other. Specify CreditCard							
4.2 5	Us Bank	Last 4 digits of account number	4717	\$0.00					
	Po Box 5227	When was the debt incurred?	Opened 9/01/99 Last Active 6/01/03						
	Cincinnati, OH 45201 Number Street City State Zip Code	As of the date you file, the claim is	Chook all that apply						
	Who incurred the debt? Check one.	As of the date you me, the claim is	oneck all that apply						
	Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only								
	☐ At least one of the debtors and another	t least one of the debtors and another Type of NONPRIORITY unsecured claim:							
	☐ Check if this claim is for a community								
	debt Is the claim subject to offset?	☐ Obligations arising out of a separ	ration agreement or divorce that you did not						
	□ No	Debts to pension or profit-sharing	plans, and other similar debts						
	☐ Yes	Other. Specify Secured							

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Debtor	¹ Froylan Vega		Case number (if known)					
4.2 6	Verizon	Last 4 digits of account numbe	r 0001	\$0.00				
	Nonpriority Creditor's Name Verizon Wireless Department/Attr Bankru Po Box 3397	I: When was the debt incurred?	Opened 6/01/06 Last Active 10/01/08					
	Bloomington, IL 61702 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the clain	n is: Check all that apply					
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecur	ed claim:					
	☐ Check if this claim is for a community debt	☐ Student loans	anatian and an all and a state of the state					
	Is the claim subject to offset?	report as priority claims	paration agreement or divorce that you did no	Ţ				
	■ No	Debts to pension or profit-shar	ing plans, and other similar debts					
	☐ Yes	Other. Specify						
4.2	Wfm/wbm	Last 4 digits of account number	- 5638	Notice/Unknown				
. لــــــــا	Nonpriority Creditor's Name							
	3480 Stateview Blvd-Bldg 2s Fort Mill, SC 29715	When was the debt incurred?	Opened 1/01/02 Last Active 5/01/02					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecure ☐ Student loans	ed claim:					
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not						
	Is the claim subject to offset?	report as priority claims	aration agreement of divorce that you did not					
	■ No	Debts to pension or profit-shari	ing plans, and other similar debts					
	☐ Yes	Other. Specify Convention	nalRealEstateMortgage	_				
Part 3:	List Others to Be Notified About a D	ebt That You Already Listed						
is tryir have n	is page only if you have others to be notified ag to collect from you for a debt you owe to s nore than one creditor for any of the debts th d for any debts in Parts 1 or 2, do not fill out	someone else, list the original creditor i lat you listed in Parts 1 or 2, list the add or submit this page.	n Parts 1 or 2, then list the collection agen litional creditors here. If you do not have a	cv here. Similarly, if you				
	d Address solvency Group 3	On which entry in Part 1 or Part 2 did you Line 2.2 of (<i>Check one</i>):						
	ox 44985 - STOP SB380		Part 1: Creditors with Priority Unsecured Cl Part 2: Creditors with Nonpriority Unsecure					
Indian	apolis, IN 46244	Last 4 digits of account number	□ Part 2. Greditors with Nonphonty Onsecure	d Claims				
Name an	d Address	On which entry in Part 1 or Part 2 did you	ulist the original creditor?					
Komya	atte & Casbon PC		\Box Part 1: Creditors with Priority Unsecured Cl	aims				
	fordon Drive nd, IN 46322	ı	Part 2: Creditors with Nonpriority Unsecure	d Claims				
піўпіа	114, 114 40322	Last 4 digits of account number						
Name an	d Address	On which entry in Part 1 or Part 2 did you	u list the original creditor?					
	ffices of Ed Overcash LLC	Line 4.2 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Cl					
	a Road, Ste. 401 ville, SC 29615	ı	Part 2: Creditors with Nonpriority Unsecure	d Claims				
	• · · · · · · · · · · · · · · · · · · ·	Last 4 digits of account number						
	d Address & McDaniel	On which entry in Part 1 or Part 2 did you Line 4.2 of (Check one):	ulist the original creditor?					

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

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Case number (if known)
☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims ts of account number
entry in Part 1 or Part 2 did you list the original creditor? of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims ts of account number
entry in Part 1 or Part 2 did you list the original creditor? If (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims is of account number
- t

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 798.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 798.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 18,001.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 18,001.00

Case 19-21765-jra Doc 1-3 Filed 06/27/19 Page 28 of 35

Fill in this info	ormation to identify your	case:				
Debtor 1	Froylan Vega	Company to the second				
Debtor 2	First Name	Middle Nan	ne	Last Name		
(Spouse if, filing)	First Name	Middle Nam	ne	Last Name		
United States E	Bankruptcy Court for the:	NORTHERN	DISTRICT OF	INDIANA		
Case number						
(if known)						Check if this is an amended filing
						• • • •
Official F	orm 106G					
Schedul	e G: Executory	y Contra	cts and	Unexpired Leas	ses	12/15
information. If	e and accurate as possib more space is needed, c es, write your name and	opy the additio	nal page, fill	e filing together, both are ed it out, number the entries, a	qually respons and attach it to	ible for supplying correct this page. On the top of any
1. Do you ha	ve any executory contra	cts or unexpire	d leases?			
				er schedules. You have noth ases are listed on <i>Schedule A</i>		
example, r						ch contract or lease is for (for examples of executory contracts
	r company with whom yo Name, Number, Street, City,		ntract or leas	e State what the contr	ract or lease is	for
2.1 Name						
Number	Street					
City	(State	ZIP Code		·	The state of the s
Name						
Number	Street					
City		State	ZIP Code			
2.3						
Name						
Number	Street					
City 2.4	(State	ZIP Code			
Name						
Number	Street		-			
		N-4-	710.0-4-			
City 2.5		State	ZIP Code			· · · · · · · · · · · · · · · · · · ·
Name				·····		
Number	Street					
City	5	State	ZIP Code			

Case 19-21765-jra Doc 1-3 Filed 06/27/19 Page 29 of 35

Fill in this i	nformation to identify your	case:			
Debtor 1	Froylan Vega	Middle Name	Last Name		
Debtor 2 (Spouse if, filing) First Name	Middle Name	Last Name		
	es Bankruptcy Court for the:	NORTHERN DISTRIC			
Case numbe					
(if known)	JI				☐ Check if this is an amended filing
Official	Form 106H				
Schedu	ıle H: Your Cod	ebtors			12/15
fill it out, and your name a		boxes on the left. Attac . Answer every question	h the Additional Page and	to this page. On the to	needed, copy the Additional Page, op of any Additional Pages, write
■ No	, ,		·		
☐ Yes					
	n the last 8 years, have you California, Idaho, Louisiana,				ty states and territories include)
	Go to line 3. Did your spouse, former spou	use, or legal equivalent liv	e with you at the time?		
in line 2	l again as a codebtor only i 06D), Schedule E/F (Official	f that person is a guarar	ntor or cosigner. Make	sure you have listed t	ng with you. List the person shown the creditor on Schedule D (Official Schedule E/F, or Schedule G to fil
	olumn 1: Your codebtor me, Number, Street, City, State and ZI	P Code		Column 2: The cr Check all schedul	editor to whom you owe the debt es that apply:
3.1				Schedule D, lir	
Na	me			☐ Schedule E/F, ☐ Schedule G, liı	-
Nu Cit	mber Street	State	ZIP Code		
	-				
3.2				Schedule D, lir	
Na	me			☐ Schedule E/F,☐ Schedule G, lir	·
	mber Street			<u> </u>	
City	у	State	ZIP Code		

F	I in this information to identify your o	ase:							
De	ebtor 1 Froylan Veç	ga							
	ebtor 2								
Ur	nited States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF INDIANA						
	ase number 	_				ed filing ent show	ing postpetitior following date:		
С	official Form 106l							iollowing date:	
_	chedule I: Your Inc	ome				MM / DD/ Y	7 Y Y Y		12/15
sup spc atta	as complete and accurate as pos- plying correct information. If you buse. If you are separated and you ach a separate sheet to this form.	are married and not filing w	ng jointly, and your : ith you, do not inclu	spouse de infoi	is liv mati	ring with you, incl on about your spe	ude info	rmation about nore space is	your needed.
1.	Fill in your employment information.		Debtor 1		right S	Debtor 2	2 or non-	filing spouse	
;	If you have more than one job,	Employment status	Employed	Employed			☐ Employed		
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed			mployed		
	employers.	Occupation	Mechanic						
	Include part-time, seasonal, or self-employed work.	Employer's name	Self Employed						
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed ti	here? 22 year	s					
Pá	d 2: Give Details About Mor	nthly Income							
E sti	imate monthly income as of the dause unless you are separated.	ate you file this form. If y	you have nothing to re	port for	any	line, write \$0 in the	space. Ir	nclude your nor	n-filing
f yo nor	ou or your non-filing spouse have mo e space, attach a separate sheet to	ore than one employer, co this form.	embine the information	n for all	emplo	oyers for that perso	n on the	lines below. If y	ou need
						For Debtor 1		ebtor 2 or ling spouse	
2.	List monthly gross wages, salar deductions). If not paid monthly, o	ry, and commissions (be calculate what the monthly	efore all payroll y wage would be.	2.	\$	0.00	\$	N/A	
3.	Estimate and list monthly overti	me pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	0.00	\$	N/A	

Official Form 106l Schedule I: Your Income page 1

Del	otor 1	Froylan Vega	_	Ca	ase number (if known)	_			
				F	For Debtor 1		For Debtor		1 1
	Cop	y line 4 here	4.	\$	0.00		\$	N/A	_
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	;	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$			\$	N/A	_
	5c.	Voluntary contributions for retirement plans	5c.	\$. :	\$	N/A	_
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	· :	\$	N/A	_
	5e.	Insurance	5e.	\$	0.00		\$	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00		\$	N/A	_
	5g.	Union dues	5g.	\$	0.00		\$	N/A	
	5h.	Other deductions. Specify:	5h.	+ \$	0.00	+ ;	\$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	. (\$	N/A	<u>.</u>
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	. (\$	N/A	<u>. </u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	2,670.00	1	\$	N/A	
	8b.	Interest and dividends	8b.	\$			\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$			\$	N/A	-
	8d.	Unemployment compensation	8d.	•	0.00	. '	•	N/A	
	8e.	Social Security	8e.	\$	0.00	Ų	\$	N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$			\$	N/A	
	8g.	Pension or retirement income	8g.	\$	0.00	9	·	N/A	
	8h.	Other monthly income. Specify:	_ 8h.⁴	+ \$	0.00	+ \$	Ď	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	2,670.00	4	\$	N/A	4
10.	Calc	ulate monthly income. Add line 7 + line 9.	10. \$		2,670.00 + \$		N/A	= \$	2,670.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.			2,070.00		IVA		2,070.00
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a sify:	depen		•		in <i>Schedule</i>	∍ J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines						\$	2,670.00
							ı	Combin	
13.	Do y	ou expect an increase or decrease within the year after you file this form?	?					montni	y income
	П	Yes, Explain:							

Official Form 106l Schedule I: Your Income page 2

SCHEDULE I - YOUR INCOME ATTACHMENT A

Froylan Vega

Chapter 13 Case No. 19-

Self Employed I	Mechanic		Rental Income		
Gross Income	\$	2,200.00	Gross Income		\$ 900.00
Expenses:			Expenses:		
Supplies	\$	50.00	RE Taxes		\$ 280.00
			Repairs/Maintenance		\$ 100.00
	Total: \$	50.00		Total:	\$ 380.00
Net Income	\$	2,150.00	Net Income		\$ 520.00

i i	A A P	A								
STEEL STEEL	in this informa	ation to identify y	our case:							
Del	Pebtor 1 Froylan Vega					С	heck			
Dok	ntor O							n amended filing		
1	otor 2 ouse, If filing)								ing postpetition chapter the following date:	
, ,								•		
Uni	ted States Bankı	ruptcy Court for the	: NORTI	HERN DISTRICT OF INDI	ANA		M	M / DD / YYYY		
	se number (nown)									
0	fficial Fo	rm 106J								
S	chedule	J: Your	Exper	1989					12/·	4 5
Be info	as complete ormation. If m	and accurate as	s possible eded, atta	. If two married people a ach another sheet to this	re filing together, bo form. On the top of	th are e any add	quall lition	y responsible fo al pages, write y	r supplying correct	13
Pai 1.	t 1: Descr Is this a joir	ibe Your House	hold							_
١.										
	No. Go to									
			n a separ	ate household?						
				- I - I - I - I - I - I - I - I - I - I	- 6 0 1-11					
	L., Y.	es. Debior 2 mus	at file Offici	al Form 106J-2, <i>Expense</i>	s for Separate Houser	nold of D	ebtor	2.		
2.	Do you have	e dependents?	□ No							
	Do not list De Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor			Dependent's age	Does dependent live with you?	
	Do not state	the							□ No	
	dependents	names.			Daughter			15	Yes	
									□ No	
					Daughter			16	Yes	
									□ No	
									☐ Yes	
									□ No	
2	De		_						☐ Yes	
3.		enses include people other th	าวท	No						
		l your depender		Yes						
-				_						
		ate Your Ongoir		y Expenses ıptcy filing date unless y	rou are union this for			la manut in a Ohan		_
exp	enses as of a licable date.	date after the b	ankruptc	y is filed. If this is a supp	olemental Schedule	<i>I</i> III as a s <i>I</i> , check	supp the l	oox at the top of	the form and fill in the	
Incl	ude expenses	s paid for with n	ion-cash	government assistance i	f vou know					
the	value of such	ı assistance and	l have inc	luded it on Schedule I: \	our Income					
(Off	icial Form 10	61.)						Your expe	nses	
4.	The rental or payments and	r home ownersh d any rent for the	nip expense ground o	ses for your residence. I r lot.	nclude first mortgage	4.	\$_		0.00	
	If not include	ed in line 4:							-	
	4a. Real es	state taxes				4a.	\$		122.00	
		ty, homeowner's	, or renter	s insurance		4a. 4b.	φ – \$		133.00	
				pkeep expenses		4c.	\$ -		95.00 0.00	
		wner's associati				4d.	\$ -		0.00	
5.				ur residence, such as ho	me equity loans	5.			0.00	

Deb	otor 1	Froylan	Vega	Case nur	mber (if known)					
6.	Utiliti	ies:								
	6a.	Electricity	y, heat, natural gas	6a	. \$	135.00				
	6b.	Water, se	ewer, garbage collection	6b	. \$	40.00				
	6c.	Telephor	ne, cell phone, Internet, satellite, and cable services	6c	. \$	115.00				
	6d.	Other, Sp	pecify:	6d.		0.00				
7.	Food		sekeeping supplies	7.		400.00				
8.			children's education costs	8.		0.00				
9.			dry, and dry cleaning	9.		50.00				
			products and services	10.	·	0.00				
			ental expenses	11.						
			. Include gas, maintenance, bus or train fare.	, , ,	Ψ	0.00				
	Do no	ot include o	car payments.	12.	. \$	100.00				
13.			clubs, recreation, newspapers, magazines, and books	13.	\$	0.00				
			tributions and religious donations	14.	· —	0.00				
	Insur		and ionglous defications	17.	Ψ	0.00				
	Do not include insurance deducted from your pay or included in lines 4 or 20.									
		Life insur		15a.	\$	0.00				
	15b.	Health ins	surance	15b.		0.00				
	15c.	Vehicle in	surance	15c.	· · · · · · · · · · · · · · · · · · ·	60.00				
	15d.	Other ins	urance. Specify:	15d.						
16			nclude taxes deducted from your pay or included in lines 4 or 20.	100.	Ψ	0.00				
			erty Tax for 5425 Molesberger Pl., Hammond	16.	\$	446.00				
			erty Tax for 1261 Summer St., Hammond		¢	116.00				
17			ease payments:		Ψ	160.00				
17.			ents for Vehicle 1	17a.	¢	0.00				
			ents for Vehicle 2	17a. 17b.	·	0.00				
		Other. Sp			· — · · · · · · · · · · · · · · · · · ·	0.00				
		Other. Sp	· · · · · · · · · · · · · · · · · · ·	17c.		0.00				
10			•	17d.	ቅ	0.00				
10.	doduc	payments	of alimony, maintenance, and support that you did not report a your pay on line 5, Schedule I, Your Income (Official Form 106I).	ı s 18.	\$	0.00				
19	Other	navment	s you make to support others who do not live with you.	. 10.	\$					
	Specif		b you make to support others who do not live with you.	19.	Ψ	0.00				
20			erty expenses not included in lines 4 or 5 of this form or on Sch		aur Income					
20.			s on other property	20a.		0.00				
		Real esta	• • •	20a. 20b.		0.00				
			homeowner's, or renter's insurance			0.00				
			nce, repair, and upkeep expenses	20c.		0.00				
			er's association or condominium dues	20d.	`	0.00				
04			er's association or condominium dues	20e.		0.00				
21.	Other	: Specify:		21.	+\$	0.00				
22.	Calcu	late vour	monthly expenses							
			through 21.		\$	1,404.00				
			2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	1,404.00				
	220. A	add lifte ZZ	a and 22b. The result is your monthly expenses.		\$	1,404.00				
23.	Calcul	late vour	monthly net income.							
			12 (your combined monthly income) from Schedule I.	23a.	\$	2,670.00				
			monthly expenses from line 22c above.	23b.	'					
		- 50, 1001		200.	Ψ	1,404.00				
	23c.	Subtract v	our monthly expenses from your monthly income.							
		The result	is your monthly net income.	23c.	\$	1,266.00				
			,							
24.	Do you	u expect a	an increase or decrease in your expenses within the year after y	ou file this	form?					
	For exa	or example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a								
	modifica	nodification to the terms of your mortgage?								
	No.	ı								
	☐ Yes	2	Explain here:							

Fill in this information to identify your	0200						
Debtor 1 Froylan Vega		The state of the s					
First Name	Middle Name	Last Name					
Debtor 2 (Spouse if, filing) First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:	NORTHERN DISTRIC	T OF INDIANA					
Case number							
(if known)			☐ Check i amende	if this is an ed filing			
Official Form 106Dec							
Declaration About a	an Individua	l Dobtor's Sch	odulos				
Deciaration About 8	ili iliurvidua	Dentol 3 3cl	iedules	12/15			
If two married people are filing togethe	r, both are equally resp	onsible for supplying correc	ct information.				
You must file this form whenever you f obtaining money or property by fraud i years, or both. 18 U.S.C. §§ 152, 1341,	n connection with a ban	es or amended schedules. N nkruptcy case can result in f	laking a false statement, concealing fines up to \$250,000, or imprisonme	property, or nt for up to 20			
Sign Below							
Did you pay or agree to pay some	one who is NOT an atto	rney to help you fill out ban	nkruptcy forms?				
No No							
Yes. Name of person	s. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)						
Under penalty of perjury, I declare that they are true and correct.	that I have read the sun	nmary and schedules filed v	vith this declaration and				
x tugh lego		Х					
Froylan Vega Signature of Debtor 1		Signature of De	ebtor 2				
Date June 11, 2019		Date					